PTO/SB/01 (03-01)
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Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number. **NTZ 0110 PCT** Attorney Docket Number **DECLARATION FOR UTILITY OR** WILHELMUS P. M. SCHAERLAECKEI First Named Inventor **DESIGN PATENT APPLICATION COMPLETE IF KNOWN** (37 CFR 1.63) APPLIED FOR **Application Number HEREWITH** Filing Date **✓** Declaration Declaration Submitted OR Submitted after Initial Group Art Unit

	with Initial	Filing (surcharge	Group Art Onit								
	Filing	(37 ČFR 1.16 (e)) required)	Examiner Name								
	As a below named inventor. I he	rehy declare that:		- · · · ·							
	As a below named inventor, I hereby declare that:										
	My residence, mailing address, and citizenship are as stated below next to my name.										
	I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:										
	MICRO-FILTER DEVICE WITH BY PASS AND METHOD OF DESIGN THEREFOR										
	(Title of the Invention)										
	(Title of the Invention) the specification of which										
	is attached hereto										
	OR										
	was filed on (MM/DD/YYYY)	as United States Application Number or PCT Internation									
	Application Number	and was ar	mended on (MM/DD/YY	YY)	(if applicable).						
	I hereby state that I have reviewed amended by any amendment spec	and understand the con	tents of the above ident	ified specification	, including the claims, as						
	• •			1.5. 1. 07.05	D.4.50 including for continuation						
	I acknowledge the duty to disclose in-part applications, material inform	nation which became ava	ilable between the filing	defined in 37 CFI date of the prior	r application and the national or						
	PCT international filing date of the	continuation-in-part appli	ication.								
	I hereby claim foreign priority bene or plant breeder's rights certificate	e(s), or 365(a) of any P0	CT international applica	tion which desig	nated at least one country other						
	than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent, inventor's or plant breeder's rights certificate(s), or any PCT international application having a filing date before that of the										
	application on which priority is clair			· · · · · · · · · · · · · · · · · · ·	Certified Copy Attached?						
	Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	YES NO						
F	PCT/IB2004/000419	EPO	02/19/2004								
ľ		2.0									
Ĺ	Additional foreign application	numbers are listed on a s	supplemental priority da	ta sheet PTO/SB	/02B attached hereto:						

DECLARATION — Utility or Design Patent Application

Direct all correspondence to: Customer Nu or Bar Code		1 02/255		OR Correspondence address below					
ROBERT P. RENKE ARTZ & ARTZ, P.C. Name									
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SOUTHFIELD		State MI			ZIP 48034				
U.S.A. Country	Telep	248-223-9500 ephone			248-223-9522 Fax				
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.									
NAME OF SOLE OR FIRST INVENTOR :									
Given Name WILHELMUS PE (first and middle [if any])	MARIA	Family Name or Surname		SCHAERLAECKENS					
Inventor's Signature	Date								
ROTTERDAM Residence: City		THE NETHE Country		THE NETHERLANDS	NETHERLANDS Citizenship				
SYDNEYSTRAAT 60 Mailing Address									
City		State	3047 BP ZIP		THE NETHERLANDS				
NAME OF SECOND INVENTOR: A petition has been filed for this unsigned inventor									
Given Name (first and middle [if any])		Family Name or Surname							
Inventor's Signature				Date					
Residence: City		State		Country	Citizenship				
Mailing Address									
City		State		ZIP	Country				
Additional inventors are being named on thesupplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto.									